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Application Number 10/751.119

REVOCATION OF POWER OF First Named Inventor Mehlo, Nizar Youssef **NEW POWER OF ATTORNEY Art Unit** 1731 **Examiner Name** Mayes, Dionne Walls

CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number 3117-101 I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR ☐ I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with **Customer Number:** OR Firm or Blankenship Law, PLLC 7 Individual Name Address 2815 Hartland Road Suite 120 City State VA Zip 22043 Falls Church Country USA Telephone Email attomey@biankenshiplawplic.com 703-205-0044 I am the: -Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Nizer Youesef Mehio

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by \$5 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. 8ex 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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